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OMB APPROVAL

Expires: Decembe Estimated average burden hours per form

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR

SEC USE ONLY

THOMSON FINANCIAL

PROCESSED

AUG 13 2003

Prefix

OMB Number:

Serial

3235-0076 December 31, 1993

Date Received

(3) REPREVAD

AUG 1 2 2003 changed, and indicate change.)

Name of offering ([] check if this is an amendment and name HEARTLAND- 4-WELL DEVELOPMENT 2003, GP

Filing Under (Check boxes(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 [ ] Section 4(6) [ ] ULOE

Type of Filing: [] New Filing [X] Amendment [ ] Final

UNIFORM LIMITED OFFERING EXEMPTION

### BASIC IDENTIFICATION DATA

Enter the information requested about the issuer ([] check if this is an amendment and name has changed, and indicate change.)

HEARTLAND-4 WELL DEVELOPMENT 2003, GP Address of Executive Offices (Number and Street, City, State, Zip Code) 942 SEARCY WAY, BOWLING GREEN, KENTUCKY 42103 (NEW ADDRESS)

Telephone Number (Including Area Code) 877 304 1040

Address of Principal Business Operations (Number and Street, City, Sate, Zip Code) 942 SEARCY WAY, BOWLING GREEN, KENTUCKY 42103

(NEW ADDRESS)

Telephone Number (Including Area Code) 877 304 1040

Brief Description of Business DRILLING AND REDRILLING OF OIL AND GAS WELLS

Type of Business Organization

[] corporation

Filing Fee: There is no federal filing fee.

[ ] limited partnership, already formed

[X ] Other (please specify): GENERAL PÁRTNERSHIP

[ ] business trust [] limited partnership to be formed

Actual or Estimated Date of Incorporation or Organization:

Month Year

0 7 0 3

[X] Actual

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

K Y

#### GENERAL INSTRUCTIONS

5 Must File: All issuers making an offering of securities in reliance eon an exemption under Regulation D or Section 4(6), CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the addresses given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifty Street, NW, Washington, D.C. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuers and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the securities Administration in each state where sales are to be, or have been made. If a state requires, the payment of a fee as a precondition to the Claim for the exemption a fee in the property amount shall accompany this form. This notice shall be filed in completed.

The Appendix to the notice constitutes a part of this notice and must be

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to predicated on the filing of federal notice will not result in a loss of available state exemption unless such exemption is

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Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized with the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10%

or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing

partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partners Full Name (Last name first, if individual) HEARTLAND ENERGY INC. Business or Residence Address (Number and Street, City, State, Zip Code) 942 SEARCY WAY, BOWLING GREEN, KENTUCKY 42103 Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partners Full Name (Last name first, if individual) MARK HAYNES Business or Residence Address (Number and Street, City, State, Zip Code) 942 SEARCY WAY, BOWLING GREEN, KENTUCKY 42103 Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partners Full Name (Last name first, if individual) DAVID STEWART Business or Residence Address (Number and Street, City, State, Zip Code) 942 SEARCY WAY, BOWLING GREEN, KENTUCKY 42103 Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					R. TNFORM	IATTON AR	OUT OFFE	RING				
1. Has the	e issuer :	sold, or	does the						investo	rs in thi	s offeri	ng? [X]Yes
			Answer	also in .	Appendix	, Column	2, <b>if</b> fi	ling und	er ULOE.			
2. What i	s the min	nimum inv	estment	that wil	l be acce	epted fro	m an ind	ividual?		. 1/4 u	nit	\$ 8,700
3. Does t	he offer:	ng permi	t joint	ownershi	of a si	ngle uni	t?				[x]	Yes [ ] No
any commis offering. and/or wit	sion or s If a per h a state	similar r son to b or stat	emunerat e listed es, list	ion for a is an as the name	solicitat ssociated s of the	tion of po l person of broker o	urchaser or agent r dealer	in conne of a bro . If mo:	ction wit ker or de re than f	th sales ealer reg ive (5)	of securi istered v persons t	ties in the vith the SEC to be listed
	B. INFORMATION ABOUT OFFERING  Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? [X]Yes to non-accredited investors in this offering? [X] Yes to non-accredited investors in the non-accredited permit joint ownership of a single unit?											
Full Name	(Last nar	ne first,										
Full Name	(Last nar	ne first,			treet, Ci	ty, Stat	e, Zip Co	ode)				
Full Name	(Last name	ne first, nce Addre	ss (Numb		treet, Ci	ty, Stat	e, Zip Co	ode)				
Full Name Business o	(Last name of Resider sociated	ne first, nce Addre Broker o	ss (Number	er and St	·	•		·				
Full Name Business of Name of as States in	(Last name of Resider sociated Which Per	me first, ace Addre Broker o	ss (Number r Dealer ed Has Se	er and St	or Inter	nds to So	licit Pu	rchasers			(1	All States
Full Name  Business of associates in (Check [AL] [IL] [MT]	(Last name of Resider sociated which Per all State [AK] [IN] [NE]	me first, ace Addre Broker of son List tes" or c  [AZ] [IA] [NV]	ss (Number Dealer ed Has Scheck ind:  [AR] [KS] [NH]	er and Stocker and	or Inter States) . [CO] [LA] [NM]	ds to So [CT] [ME] [NY]	licit Pu: [DE] [MD] [NC]	rchasers [DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	tes" or c	heck ind	ividual	States) .						[]	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	es" or c	heck ind:	ividual S	States) .						[]	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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'0" i	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND to the aggregate offering price of securities included in this offering and f answer is "none" or "zero". If the transaction is an exchange offering, and below the amounts of the securities offered for exchange and already	the total amount a check this box []	already sold. Enter and indicate in the
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		\$
	[] Common [] Preferred	·	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$ \$73,125
\$	Total		
<u> </u>	Answer also in Appendix, Column 3, if filing under ULOE.		
a p	inter the number of accredited and non-accredited investors who have pure nd the aggregate dollar amounts of their purchases. For offerings under ersons who have purchased securities and the aggregate dollar amount of t	Rule 504, indicate	e the number of
	Accredited Investors	2	\$ 73,125
	Non-accredited investors	\$	<b>\$</b>
	Answer also in Appendix, Column 4, if filing under ULOE		
S	f this filing is for an offering under Rule 504 or 505, enter the informa old by the issuer, to date, in offerings of the types indicated, in the irst sale of securities in this offering. Classify securities by type 1	twelve (12) month	is prior to the
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$ \$
	Rule 504		\$
	Total		\$
t. b	. Furnish a statement of all expenses in connection with the issuance and his offering. exclude amounts relating solely to organization expenses of e given as subject to future contingencies. If the amount of an expension	the issuer. The	information may
	Transfer Agent's Fees		) \$
	Printing and Engraving Costs	[	] \$
	Legal Fees		] \$_6,000
	Accounting Fees	[	] \$500
	Engineering Fees	[	1 \$ 500
	Sales Commissions (specify finders' fees separately)		] \$
	Other Expenses (identify) printing and miscellaneous		1 \$ 3,000
	Total		<del></del>
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		A EVERYORS NYE HOT OF PROGREDS
	C. OFFERING PRICE, NUMBER OF INVESTO 1. b. Enter the difference between the aggregate offering total expense furnished in response to Part C - Quest proceeds to the issuer."	price given in response to Part C - Question 1 and ion 4.a. This difference is the "adjusted gross
5.	5. Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any purpose is the left of the estimate. The total of the payments li issuer set forth in response to part C - Question 4.b a	not known, furnish an estimate and check the box to sted must equal the adjusted gross proceeds to the
		Payments to Officers
		Directors & Payments to Affiliates Others
	Salaries and Fees	[] \$ [] \$
	Purchase of Real Estate	[] \$ [] \$
	Purchase, rental or leasing & installation of machin	nery & equipment [] \$ [] \$
	Construction or leasing of plat buildings and facil:	ties [ ] \$ [ ] \$
	Acquisition of other businesses (including the valuinvolved in this offering that may be used in eassets or securities of another issuer pursuant to	change for the
	Repayment of Indebtedness	[ ] \$ [ ] \$
	Working Capital	[] \$ [] \$
	Other (Specify) Contract Drilling and Comple	tion [] \$ 1,730,000 [] \$
		[ ] \$ [ ] \$
	Column Totals	[ ] \$ 1,730,000 [ ] \$
	Total Payments Listed (column totals added)	
	D. FEDERAL SI	
il Sec	The issuer has duly caused this notice to be signed by the filed Under Rule 505, the following signature constitutes Securities and Exchange Commission, upon written request of any non-accredited investor pursuant to paragraph 9b)(2) of	an undertaking by the issuer to furnish to the U.S. its staff, the information furnished by the issuer to
Ιs	Issuer (Print or Type) Signature	Date
	HEARTLAND 4-WELL DEVELOPMENT 2003,GP	WALLO . 7-31-03
Na	Name of Signer (Print or Type)  Title of Signer(Print or Type)	ner (Pfint or Type)
M	MARK HAYNES	ND RESOURCES, INC.

ATTENTION

International misstatement or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATUR	RE
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See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is flied, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)

HEARTLAND 4 WELL DEVELOPMENT 2003,

GP

Name of Signer (Print or Type)

MARK HAYNES

PRESIDENT

HEARTLAND RESCOURCES, INC.

Instructions:

Print the names and title of the signing representative under his signature for the state portion of this form. Once copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signature.

## APPENDIX

1	2		2 3 4							
	Inte sell t accre inve (Par	Intend to Security and accredited investors (Part B- Item 1)  Intend to Type of Security and aggregate offering price offered in State (Part C- Item 1)  Type of investor and amount purchased in state (Part C-Item 2)						Disqualification under state ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	GENERAL PARTNERSHIP \$955,500	Number of Accredited Investors	Amount	Number of Non- Accredite Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA	х		"	2	58,500					
CO										
CT										
DE				<u> </u>						
DC										
FL										
GA										
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD										
MA										
MI										
MN									<del>                                     </del>	
MS										
MO										

# APPENDIX

1	2		3		4			5		
	sell t accre inve (Par	nd to o non- dited stors t B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Type of i	Disqualificatio n under state ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No	GENERAL PARTNERSHIP \$955,500	Number of Accredited Investors	Amount	Number of Non- Accredite Investors	Amount	Yes	No	
MT										
NE			-							
NV										
NH										
NJ							•			
NM										
NY										
NC	-									
ND										
ОН										
ОК										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA	х		"	1	14,625					
WA										
WV										
MI										
WY										
PR										

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